APR 2 3 2007

Atty Docket No. 026693-005710US

PTO FAX NO.: 1-571-273-8300

ATTENTION:

Examiner Lori A. Clow

Group Art Unit 1631

OFFICIAL COMMUNICATION FOR THE PERSONAL ATTENTION OF EXAMINER LORI A. CLOW

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of William E. Rich et al., Application No. 10/076,967, filed February 15, 2002 for METHOD FOR CORRELATING GENE EXPRESSION PROFILES WITH PROTEIN EXPRESSION PROFILES are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

- 1. Transmittal Form (1 pg.);
- 2. Fee Transmittal Form (2 pgs.);
- 3. Request for Continued Examination Transmittal (1 pg.);
- 4. Petition for Extension of Time Under 37 CFR 1.136 (a) 1 month (1 pg.);
- Amendment Under 37 CFR 1.116 Expedited Procedure Examining Group 1631 (10 pgs.)

Number of pages being transmitted, including this page: 100

Dated: April 23, 200

Anna Marie Aranto

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TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, CA 94111-3834 Telephone: 925-472-5000

Fax: 925-472-8895

61036519 v1

						PTO/SB/21 (07-06)				
		Application Number	Application Number 10/076,967							
TRANSMITTAL		Filing Date	F	bruary 15, 20						
FORM		First Named Inventor Rich, William			E. RECEIVED					
		Art Unit	16	331		ENTRAL FAX CENTER				
(to be used for all correspondence and	r initial filing)	Examiner Name	Lo	ori A. Clow		APR 2 3 2007				
Total Number of Pages in This Submiss		Attorney Docket Numbe	r 0:	26693-00571	ous					
ENCLOSURES (Check all that apply)										
Fee Transmittal Form		Drawing(s)		After	eal Com	nce Communication to TC munication to Board				
Fee Attached		Licensing-related Papers	•	App App	eal Com	nd Interferences munication to TC				
Amendmont/Reply After Final		Petition Petition to Convert to a				e, Briof, Reply Brief) pformalion				
Affidavits/declaration	(s)	Provisional Application Power of Attorney, Revo			tus Lette	l				
Extension of Time Request		Change of Correspondence Address Terminal Disclaimer			ther Enclosure(s) (please identify elow):					
Express Abandonment Request		Damilest for Dofund			n Postcard; Request for Continued ination					
Information Disclosure Statement		CD, Number of CD(s)		.		•				
		Landscape Table	on CD							
Ccrtified Copy of Priority Document(s)	Rer	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.								
Reply to Missing Parts/ Incon Application Reply to Missing Part under 37 CFR 1.52 o	s									
	SIGNATURE	OF APPLICANT, A	TTORNEY	, OR AGENT						
Firm Name Townsend an	d Townsend a	and Crew LLP	•	•						
Signature gone	H. ye	e								
Prinled name Gene H. Yee										
Date April 23, 2007	•		Reg. No.	57,471						
	CERTI	FICATE OF TRANSM	ISSION/N	IAILING						
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on April 23, 2007.										
Signature du duto										
Typed or printed name Anna Marie Arante					Date	April 23, 2007				

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PTO/SB/17 (07-06)

	Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number 10/076,96								
FEE TRANSMITTAL	Filling Date	February 15 2007RAL FAX CENTER							
For FY 2006	First Named Inventor		am E. ADD	2 3 2007					
	Examiner Name	Lori A. Clo	w ALT	2 3 2001					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1631							
TOTAL AMOUNT OF PAYMENT (\$) 395	Attorney Docket No.	026693-00	05710U\$						
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (plcase identify):									
Deposit Account Deposit Account Number: 20-1430 Deposit Account Name; Yownsend and Townsend and Crew LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
Information and Buthorization on PTO-2038.									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES		-	-	-					
FILING FEES SE/ Smell Entity	Small Entity	XAMINATIO <u>Small E</u> Fee (\$) Fee (<u>ntity</u>	Fees Paid (\$)					
		200 100							
Utility 300 150 50		130 65	-						
Design 200 100 10	•		•						
Plant 200 100 30	· <u>-</u>			•					
Reissue 300 150 50	-	600 300	-						
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.2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$1 Fee (\$)									
Fee Description Each claim over 20 (including Reissues)			50	25					
Each independent claim over 3 (including Reissucs)	100								
Multiple dependent claims	360	180							
Total Claims Extra Claims Fee (\$) F	ee Paid (\$)	_	ultipic Depen						
-20 or HP = × = _		<u>F</u>	<u>ee (\$)</u>	Fee Paid (\$)					
HP - highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) F	ee Paid (\$)	_							
-3 or HP = x =				•					
HP = highest number of Independent claims paid for, if greater than 3									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. Sec 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Foces Paid (S)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Filing a submission after final rejection (37 CFR 1.129(a))									
SUBMITTED BY									
Signature gae H. yee	Registration No. 57 (Attorney/Agont)	,471	Telephone	925-472-5000					
Name (Print/Type) Gene H. Yee			Date April	23, 2007					

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